## UNITED STATES DISTRICT COURT

	for the			
	District of Ma	aryland		
PLEX CAPITAL, LI	_C ) ) )			
Plaintiff(s)  V.  DENTON MD OPCO LLC of HEALTHCARE AT DE DENTON NURSING AND R KEY HEALTH MANAGEM  Defendant(s)	NTON ) EHAB, LLC	Civil Action No.	1:23-cv-02709-GLR	
	SUMMONS IN A CI	IVIL ACTION		
SEI Cor 2 W	nton MD Opco LLC d/b/a Per RVE ON: Resident Agent porate Creations Network, In /isconsin Circle, #700 evy Chase, Maryland 20815	nc.	on	
A lawsuit has been filed ag	ainst you.			
are the United States or a United States P. 12 (a)(2) or (3) — you must serve the Federal Rules of Civil Procedure.	e on the plaintiff an answer	employee of the Unite to the attached compla	ed States described in Fed. Ruint or a motion under Rule 1	
	vid J. Shuster, Esquire			

if you . Civ. 2 of

> Kramon & Graham, P.A. One South Street, Suite 2600 Baltimore, Maryland 21202 (410) 752-6030 - dshuster@kg-law.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

		CLERK OF COURT	
Date:	10/6/023	District OF	
		Signature of Clerk or Deputy Clerk	

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 1:23-cv-02709-GLR

### PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (na	me of individual and title, if any)		
was re	ceived by me on (date)			
	☐ I personally served	d the summons on the indivi	dual at (place)	
			on (date)	; or
	☐ I left the summons	at the individual's residence	e or usual place of abode with (name)	
		, a <sub>]</sub>	person of suitable age and discretion who res	sides there,
	on (date)	, and mailed a cop	by to the individual's last known address; or	
	☐ I served the summ	ons on (name of individual)		, who is
	designated by law to	accept service of process or	n behalf of (name of organization)	
			on (date)	; or
	☐ I returned the sum	mons unexecuted because		; or
	☐ Other (specify):			
	My fees are \$	for travel and \$	for services, for a total of \$	0.00
	I declare under penalt	ry of perjury that this inform	ation is true.	
_				
Date:			Server's signature	
			Printed name and title	
			Server's address	

Additional information regarding attempted service, etc:

# UNITED STATES DISTRICT COURT

for the

District	of	Mary	land
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PLEX CAPITAL, LLC	)	
	)	
Plaintiff(s)	)	
v.	Civil Action No.	1:23-cv-02709-GLR
DENTON MD OPCO LLC d/b/a PEAK HEALTHCARE AT DENTON DENTON NURSING AND REHAB, LLC KEY HEALTH MANAGEMENT LLC	) ) ) )	
Defendant(s)		
(TV) (T) (A)	70 <b>33</b>	

#### SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Denton Nursing and Rehab, LLC SERVE ON: Resident Agent c/o Jack Ribakow 6607 Park Heights Avenue, Apt A2 Baltimore, Maryland 21215

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

David J. Shuster, Esquire Kramon & Graham, P.A. One South Street, Suite 2600 Baltimore, Maryland 21202 (410) 752-6030 - dshuster@kg-law.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 10/6/2023

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No.

1:23-cv-02709-GLR

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	This summons for (nan	me of individual and title, if any	y)			
was rec	ceived by me on (date)					
	☐ I personally served	the summons on the indi	vidual at (place)			
			on (date)	; or		
	☐ I left the summons	at the individual's residen	nce or usual place of abode with (name)			
	, a person of suitable age and discretion who resides there,					
	on (date)	, and mailed a c	opy to the individual's last known address; or			
	☐ I served the summo	ons on (name of individual)		, who is		
	designated by law to	accept service of process	on behalf of (name of organization)			
			on (date)	; or		
	☐ I returned the sumr	mons unexecuted because		; or		
	☐ Other ( <i>specify</i> ):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
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Date:						
Date.			Server's signature			
		_	Printed name and title			
			Server's address			

Additional information regarding attempted service, etc:

## United States District Court

for the

Distric	t of	Mary	land
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PLEX CAPITAL, LLC	) ) )	
Plaintiff(s)  V.  DENTON MD OPCO LLC d/b/a PEAK  HEALTHCARE AT DENTON  DENTON NURSING AND REHABILLO	- ) ) Civil Action No. )	1:23-cv-02709-GLR
DENTON NURSING AND REHAB, LLC KEY HEALTH MANAGEMENT LLC	_ )	
Defendant(s)	) S IN A CIVIL ACTION	

To: (Defendant's name and address)

Key Health Management LLC SERVE ON: Resident Agent AAA Services, LLC 125 Locust Street Harrisburg, Pennsylvania 17101

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

David J. Shuster, Esquire Kramon & Graham, P.A. One South Street, Suite 2600 Baltimore, Maryland 21202 (410) 752-6030 - dshuster@kg-law.com

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CLERK OF COURT 10/6/2023 Date: Signature of Clerk or Deputy Clerk AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No.

1:23-cv-02709-GLR

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			or	ı (date)		; or	
	☐ I left the summon	ns at the individual's reside	•		· -		
			_	ble age and discretion		des there,	
	on (date)	, and mailed a	copy to the indiv	idual's last known add	dress; or		
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			or	(date)		; or	
	☐ I returned the sur	mmons unexecuted because	e				; or
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	My fees are \$	for travel and S	\$	for services, for a to	otal of \$	0.00	
	I declare under pena	alty of perjury that this info	ormation is true.				
Date:							
				Server's signature	2		
		_		Printed name and ti	tle		
		_		Server's address			

Additional information regarding attempted service, etc: